3000 North Eighth Street Springfield, Illinois 62707 217-528-0491 TEL 217-528-0497 FAX



**Board of Trustees** 

Richard T. Ciotti President

Jim M. Reinhart Vice President

John M. Pasko Clerk

Rex Bangert Trustee

Drinda OConnor Trustee

Paul Ed Vehovic Treasurer

Brian Schackmann Secretary

Bruce Stratton Attorney

Justin Reichert Human Resources Officer

Gregg S. Humphrey PE PLS Executive Director

Jason J. Jacobs, P.E. District Engineer



MEMBER Illinois Association of Wastewater Agencies Date April 15, 2016

Branch Chief WECA USEPA 77 W. Jackson

Chicago, IL. 60604

RE: 2015 Pre-Treatment Report

To whom it may concern:

Please find enclosed a copy of the Springfield Metro Sanitary District's 2016 Annual Pre-Treatment Report for the calendar year 2015

Very truly yours,

Greg L. Fraase

Pre-Treatment Coordinator

# **POTW Pretreatment Annual Report Cover Sheet**

Publicity Owned Treatment	Works: Sprir	Springfield Metro Sanitary District			
Report Date: April 15	<sup>th</sup> 2016				
Period Covered by this Repo	ort: from <u>1/1/2</u>	2015_ to <u>12/31/2015</u>			
Name of Wastewater Treatn	nent Plant(s)	NPDES Permit Number			
Spring Creek		IL 002 1989			
Sugar Creek		IL 002 1971			
Sludge		2007-SC-2668			
Person to contact concernin	g information con	·			
Name: _	Greg L. Fra	ase_			
Title: _	Pre-Treatm	<u>ent Coordinator</u>			
Mailing Address:	3000 North	Eighth Street			
-	Springfield,	IL 62707			
Telephone No.	(217) 528-	0491			
Fax No.	(217) 528-	0497			
document and attachments.	Based upon my information repo	with the information submitted in this inquiry of those individuals immediately orted herein, believe that the submitted  Signature of Official  Greg L. Fraase  Typewritten Name of Official			
Gregg S. Humphrey		Pre-Treatment Coordinator			
Executive Director		Title			

## **Modified Pretreatment Summary Form**

#### Part I - General Summary Information for the Report Period

Nan	ne:	Sprin	<u>igfield Met</u> i	ro Sanita	ry District			
NPI	DES Number(s):	IL002	21989	and	lL0021971	-		
Rep	ort Period From:	1/1/2015	to		12/31/2015	_		
1.)	Number of SIUS in SNC with a	Pretreatment (	Complianc	e Schedu	ıle (SSNC)	0		
2.)	Number of Formal Enforcemen	t Orders Issue	d to SIUS (	(FENF)		0		
3.)	Number of Civil & Criminal Judi	0						
4.)	) Number of SIUS with Significant Violations Published (SVPU)							
5.)	Number of IUS From which Per	nalties (beyond	d typical us	er charge	es) have been collected (IUPI	V) <u> </u>		
6.)	Dollar amount of penalties colle	ected (PAMT)				0		
7.)								
Par	t II – Current Significant Indus	trial User Info	ormation					
1.)	Total Number of Significant IUS	S (SIUS)				9		
2.)	Number of Categorical IUS (CI	US)				6		
3.)	Number of SIUS not Inspected	or <u>Sampled</u> (N	IOIN)			0		
4.)	Number of SIUS Sampled					8		
5.)	Number of SIUS inspected					9		
6.)	Type of Control Mechanism Us	ed (Ordinance	, Permit, C	ontrol Do	oc.)	Permit		
7.)	Number of SIUS Without Contr	ol Mechanisms	s (NOCM)			0		
8.)	Number of SIUS Currently In S	NC with Stand	ards or Re	porting (	PSNC)	0		
9.)	Number of SIUS Currently in S	NC with Pretre	atment Sta	andards (	(SNPS)	0		
10.)	Number of SIUS Currently in S	NC with Repor	ting Requi	rements	(SNNC)	0		
11.)	Number of SIUS Currently in S	NC with Self M	lonitoring (	MSNC)		0		
12.)	Number of SIUS in SNC with S	elf Monitoring	and Not In	spected	or Sampled (SNIN)	0		
Par	t III – Administrative Informati	on						
1.)	Total Annual Work Hours Devo	ted to the Pret	treatment F	Program		2000		
2.)	Annual Pretreatment Program	Budget (Dollar	s)			90,000.00		
3.)	Attach Narrative Summary of A	chievements,	Problems a	and Subs	stantive Changes			
	during this Deporting Derind					NIA		

1.		General Information SIU Status:								
	a.		Χ	New:	Delete:	Name	e Char	nge:		
Cc	mn	nents:								
				-	c. Local Permit No					
	d.	Tributary Po	A WTC	IPDES #:	IL 0021989		_			
	e.	Categorical	Pretre	atment Star	idard(s) – 40 CFR:_	433 S	ubpart	<u>t B</u>		
						Metal	Finish	<u>ing</u>		
2.	a.	Compliance Total number		_	s collected by POTW ar	nd SILI:		12		
	b.		•	•	POTW and SIU:	ia 010.		_		
	C.			•	user charges (dollars):					
	d.	During the per noncomplianc	riod cove e as det	ered by this re fined by 40 CF	port was the SIU in sign R 403.8(f)(2)(vii)?	Yes:		No:X		
	e.	•		•	V in the newspaper?			No: <u>X</u>		
	f.	Is the SIU curi	rently in	compliance?		Yes:	X	No:		
3.		Narrative S	iumma	ary						
Ca	aref	ully review th	e instr	uctions to de	etermine what must	be discus	sed.			
Αt	tacl	n additional p	ages,	if needed.						
lf ı	non	e of the instr	uctions	s items (a-j)	apply, enter none he	ere:	None	•		

1.		General Information									
	a.	SIU Status: Existing:	Χ	New:	Delete:	Name	Change:_	X			
Coi	mn	nents:	Disc	onnected	-Still inspect on a ye	early basis					
	b.	Name: Star	ndard <i>l</i>	\ero							
		Local Permit	t No	#06-C-009	9						
	C.	Address:	1200	North Airpo	ort Drive, Springfield	, Illinois 62	2707				
	d.	Tributary PC	N WTC	IPDES #:	IL 0021989						
	e. Categorical Pretreatment Standard(s) – 40 CFR: 433 Subpart A										
		•			. ,		Finishing				
2.		Compliance	Sum	mary							
	a.	Total number of	of comp	liance samples	s collected by POTW an	d SIU:	0				
	b.		-	•	POTW and SIU:		0				
	C.	Total fines coll	ected b	eyond typical ι	user charges (dollars):		0				
	d.				oort was the SIU in sign R 403.8(f)(2)(vii)?			lo: <u>X</u>			
	e.	Was the SIU p	ublishe	d by the POTV	V in the newspaper?	Yes:	N	lo: <u>X</u>			
	f.	Is the SIU curr	ently in	compliance?		Yes:	<u>X</u>	lo:			
3.		Narrative S	umma	ary							
Cai	refi	ully review the	e instr	uctions to de	etermine what must	be discuss	ed.				
		n additional pa									
		•	•		apply, enter none he	ere:	None				

<sup>\*</sup>I.U. is currently using a phenolic based paint stripper that cannot be treated by the present treatment system. Paint stripping wastes are currently being trucked off-site by a licensed hauler.

1.	General Information SIU Status:									
а	. Existing:	Х	New:	Delete:		_ Name	e Cha	nge:		
Com	ments:									
								#02-NC-002		
				<u> Drive, Springfiel</u>				<del></del>		
d	. Tributary P	OTW	NPDES #:	IL 002197	1			<u>.</u>		
e. Categorical Pretreatment Standard(s) – 40 CFR: N/A								<u> </u>		
2.	Compliand	e Sum	ımary							
a	Total number	of comp	oliance sample	s collected by PO	TW and SI	U:		156		
b.	Total number	of viola	tions noted by	POTW and SIU:				0		
c.	Total fines co	llected b	eyond typical	user charges (dolla	ars):			0		
d				port was the SIU in R 403.8(f)(2)(vii)?				No:X		
е	Was the SIU	publishe	d by the POT\	N in the newspape	er?	Yes;_		No: <u>X</u>		
f.	Is the SIU cui	rrently in	compliance?			Yes:_	Х	No:		
3.	Narrative S	Summa	ary							
Care	fully review th	ne instr	ructions to d	etermine what r	must be	discus	sed.			
	ch additional <sub>I</sub>									
	•			annly enter no	na hare:		Non	Δ		

1.		SIU Status:	ormau	ווכ						
а	. E	Existing:	Χ	_ New:	Delete:		_ Name	Change	e:X	<u>.                                    </u>
Com	me	ents: <u>Form</u>	ally nar	<u>ned Assoc</u>	iates Engraving_					
		<del></del>								
b	. 1	Name: M. f	3. Desi	ans Inc.						
		Local Permit			_					
С			-		Springfield, Illino	ois				
d							-			
	d. Tributary POTW NPDES #:IL0021989 e. Categorical Pretreatment Standard(s) – 40 CFR:433 Subpart A									
	. `	oatogorioai		timom otal	10011	`		Finishing		
							Wictari	i i i i i i i i i i i i i i i i i i i	1	
2.	(	Compliance	Sumı	nary						
а	. 7	Total number o	of compli	ance sample	s collected by POTW	√ and SI	U:	1	2	
b	. 7	Total number of	of violation	ons noted by	POTW and SIU:			0	l	
С	. 7	Total fines coll	ected be	yond typical	user charges (dollars	s):		0	•	
d					port was the SIU in s R 403.8(f)(2)(vii)?	significar			No: <u> </u>	(
е	. \	Was the SIU p	ublished	by the POT\	N in the newspaper?	•	Yes:		No: <u> </u>	(
f.	1	ls the SIU curr	ently in o	compliance?			Yes:	<u>X</u>	No:	
3.	I	Narrative S	umma	ry						
Care	eful	lly review the	e instru	ctions to d	etermine what mu	ust be	discuss	ed.		
Atta	ch :	additional pa	ages, if	needed.						
If no	ne	of the instru	ıctions	items (a-j)	apply, enter none	e here:			lone	

1.	General Inf	ormat	ion				
a.		Χ	New:	Delete:	Na	ame Cha	nge:
Comr	nents:						
b.	Name: <u>Cont</u>	ech Co	onstruction I	Products, Inc.	Local Per	mit No	#07-C-005
C.	Address:	<del></del>					
d.	Tributary Po	<b>A</b> WTC	NPDES #:	IL 0021971			
e.	Categorical	<u>rt B</u>					
					Pla	astic Forr	mating
2.	Compliance	e Sum	ımary				
a.	Total number	of comp	oliance sample	es collected by POT	W and SIU:		12
b.	Total number	of violat	ions noted by	POTW and SIU:			0
C.	Total fines col	lected b	eyond typical	user charges (dolla	rs):		0
d.				eport was the SIU in FR 403.8(f)(2)(vii)?		s:	No:X
e.	Was the SIU p	ublishe	ed by the POT	W in the newspaper	? Ye	s:	No: <u>X</u>
f.	Is the SIU curi	ently in	compliance?		Ye	s: <u>X</u>	No:
3.	Narrative S	umma	ary				
Caref	fully review th	e instr	uctions to d	etermine what m	nust be disc	cussed.	
Attac	h additional p	ages,	if needed.				
lf non	e of the instr	uctions	s items (a-i)	apply, enter non	e here:	Non	е

1.		General Information SIU Status:	mation							
	a.	Existing: X	( New:	Delete:	Nam	e Char	nge:			
Co	nmo	nents:	<del></del>							
	b.	Name: South S	Sangamon Wat	er Commission	Local Permit	: No	#10-NC-012			
	C.	Address: 9	199 Buckhart I	Road Rochester	r, IL					
	d.	Tributary POTW NPDES #: IL 0021989								
		_		ndard(s) – 40 CF						
		J		, (,,		_				
2.		Compliance S	ummary							
	a.	Total number of c	ompliance sample	es collected by POT	W and SIU:		24			
	b.	Total number of v	iolations noted by	POTW and SIU:			0			
	C.	Total fines collect	ed beyond typical	user charges (dolla	rs):		0			
	d.			eport was the SIU in FR 403.8(f)(2)(vii)?	significant Yes:		No: <u>X</u>			
	e.	Was the SIU publ	ished by the POT	W in the newspaper	? Yes:_		No:X			
	f.	Is the SIU current	ly in compliance?		Yes:	Х	No:			
3.		Narrative Sun	nmary							
Ca	arefi	ully review the in	nstructions to c	letermine what m	nust be discus	sed.				
At	tach	additional pag	es, if needed.							
lf ı	non	e of the instruct	ions items (a-i)	apply, enter non	e here:	None	<b>)</b>			

1.		General Information SIU Status:									
	a.	Existing: X New: Delete:	Name C	hange:							
Cc	mm	nents:									
	b.	Name: Solomon Colors Inc. Local Perm	it No. <u>#0</u>	9-NC-010_							
	C.	. Address:4050 Color Plant Road Springfield, IL.									
	d.	. Tributary POTW NPDES #: IL 0021989									
		Categorical Pretreatment Standard(s) – 40 CFR:									
2.		Compliance Summary									
	a.	Total number of compliance samples collected by POTW and	SIU:	12							
	b.	Total number of violations noted by POTW and SIU:		0							
	C.	Total fines collected beyond typical user charges (dollars):		0							
	d.	During the period covered by this report was the SIU in signific noncompliance as defined by 40 CFR 403.8(f)(2)(vii)?	ant Yes:	No:X							
	e.	Was the SIU published by the POTW in the newspaper?	Yes:	No:X							
	f.	Is the SIU currently in compliance?	Yes: X	No:							
3.		Narrative Summary									
Ο.		Turia di Vo									
Ca	arefu	ully review the instructions to determine what must be	e discussed	-							
At	tach	n additional pages, if needed.									
lf ı	none	e of the instructions items (a-j) apply, enter none here	e: No	one							

1.		SIU Status:								
	a.	Existing: X New: X Delete:	Name	e Chang	je:					
Сс	mn	nents: Opened 12/21/2015		<del></del>						
					<del></del>					
	b.	Name: Magro Meats and Produce Local Perm	it No	#15-C-	012					
	C.	c. Address: 3150 Stanton Springfield, IL. 62703								
	d.	Tributary POTW NPDES #: IL 0021989								
	e. Categorical Pretreatment Standard(s) – 40 CFR: 432 Subpart 3									
		Simp	ole Slaug	hterhou	<u>use</u>					
2.		Compliance Summary								
	a.	Total number of compliance samples collected by POTW and	SIU:		6					
	b.	Total number of violations noted by POTW and SIU:			0					
	C.	Total fines collected beyond typical user charges (dollars):			0					
	d.	During the period covered by this report was the SIU in signific noncompliance as defined by 40 CFR 403.8(f)(2)(vii)?			No: <u>X</u>					
	e.	Was the SIU published by the POTW in the newspaper?	Yes:		No: X					
	f.	Is the SIU currently in compliance?	Yes:	Х	No:					
3.		Narrative Summary								
Ca	aref	ully review the instructions to determine what must be	e discuss	sed.						
At	tacł	n additional pages, if needed.								
lf r	าดท	e of the instructions items (a-j) apply, enter none here	ə:	None						

1.	General SIU Stat	I <b>nformat</b> i us:	on						
а	. Existing:	X	New:	Delete:	Name	Change	9;		
Com	ments: <u>B</u>	OD result	on 2/27/201	5 was 208 E	BOD result o	n 9/20/2	015 was 226		
BOD	limit is 20	0							
b	. Name:_	CWLP		Local Permit N	lo. <u>#09-C</u>	-011			
С	. Address	Address: 201 E. Lake Shore Drive, Springfield, Illinois 62703							
d	Tributary POTW NPDES #: IL 0021971								
е	e. Categorical Pretreatment Standard(s) – 40 CFR:403								
	Steam Electric Power Generating								
2.	Complia	ınce Sum	mary						
а	. Total num	ber of comp	liance sample	s collected by POTW a	and SIU:	2	214		
b	. Total num	ber of violat	ions noted by	POTW and SIU:		2			
С	. Total fines	collected b	eyond typical i	user charges (dollars):			0		
d				port was the SIU in sig R 403.8(f)(2)(vii)?	nificant Yes:		No: X		
е	. Was the S	IIU publishe	d by the POTV	V in the newspaper?	Yes:		No: <u>X</u>		
f.	Is the SIU	currently in	compliance?		Yes:	Χ	No:		
3.	Narrativ	e Summa	ıry						
Care	efully reviev	w the instr	uctions to de	etermine what mus	t be discuss	ed.			
Atta	ch addition	al pages,	if needed.						
lf no	na of tha ir	etructions	iteme (a.i)	annly enter none l	here:	None			